



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 9921

|  |   |  |   |   |                                   |  |
|--|---|--|---|---|-----------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/576,808   | <b>FILING or 371(c)<br/>DATE</b><br>04/21/2006<br><b>RULE</b>   | <b>CLASS</b><br>280                                      | <b>GROUP ART UNIT</b><br>1624   | <b>ATTORNEY DOCKET<br/>NO.</b><br>056291-5279 |                                   |  |
| <b>APPLICANTS</b><br>Dearg Sutherland Brown, Cheshire, UNITED KINGDOM;<br>Ian Alun Nash, Cheshire, UNITED KINGDOM;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/GB04/04474 10/22/2004<br><b>** FOREIGN APPLICATIONS *****</b><br>UNITED KINGDOM 0324790.5 10/24/2003<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>11/14/2006 |   |  |   |   |                                   |  |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/PAUL V WARD/</u><br>Examiner's Signature   |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR<br/>COUNTRY</b><br><br>UNITED<br>KINGDOM  | <b>SHEETS<br/>DRAWINGS</b><br><br>0           | <b>TOTAL<br/>CLAIMS</b><br><br>23 | <b>INDEPENDENT<br/>CLAIMS</b><br><br>1 |
| <b>ADDRESS</b><br><br>MORGAN LEWIS & BOCKIUS LLP<br>1111 PENNSYLVANIA AVENUE NW<br>WASHINGTON, DC 20004<br>UNITED STATES   |   |  |   |   |                                   |  |
| <b>TITLE</b><br><br>Amide derivatives  |   |  |   |   |                                   |  |
| <b>FILING FEE<br/>RECEIVED</b><br><br>1760   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                   |  |